

16310 U.S. PTO  
021004

Please type a plus sign (+) inside this box



PTO/SB/05 (03/01)  
Approved for use through 10/31/2002. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket Number		ELAN-01111US1		
		Inventor		D. Stuart Smith et al.		
		Title	Double Buffering of Serial Transfers			
		Express Mail Label No.		EV 327 619 229 US		
<b>APPLICATION ELEMENTS</b> See MPEP Chapter 600 concerning Utility Patent Application Contents				<b>ADDRESS TO:</b> Commissioner for Patents Mail Stop Patent Application Alexandria, VA 22313-1450		
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (PTO/SB/17) (in duplicate for fee processing)</p> <p>2. <input type="checkbox"/> Applicant claims small entity status (See 37 CFR 1.27)</p> <p>3. <input checked="" type="checkbox"/> Specification Total Pages <u>22</u> (preferred arrangement set forth below)</p> <ul style="list-style-type: none"><li>■ Descriptive Title of the invention</li><li>■ Cross Reference to Related Applications</li><li>■ Statement Regarding Fed Sponsored R &amp; D</li><li>■ Reference to Sequence Listing, a table or computer program listing Appendix</li><li>■ Background of the Invention</li><li>■ Brief Summary of the Invention</li><li>■ Brief Description of the Drawing(s) (if filed)</li><li>■ Detailed Description</li><li>■ Claim(s) <u>26</u></li><li>■ Abstract of the Disclosure</li></ul> <p>4. <input checked="" type="checkbox"/> Formal Drawing(s) (35 USC 113) Total Sheets <u>7</u></p> <p>5. <input checked="" type="checkbox"/> Oath or Declaration Total Pages <u>1</u></p> <p>a. <input checked="" type="checkbox"/> Newly Executed</p> <p>b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed)</p> <p>i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)</p> <p>6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76 <u>4</u> Total Pages</p>				<p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or computer program (Appendix)</p> <p>8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)</p> <p>a. <input type="checkbox"/> Computer Readable Form (CRF)</p> <p>b. Specification Sequence Listing on:</p> <p>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or</p> <p>ii. <input type="checkbox"/> paper</p> <p>c. <input type="checkbox"/> Statements verifying identity of above</p>		
<b>ACCOMPANYING APPLICATION PARTS</b>						
<p>9. <input checked="" type="checkbox"/> Assignment Papers (Cover Sheet &amp; Document(s)) <u>4</u> Total Pages</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee)</p> <p>11. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>12. <input type="checkbox"/> Information Disclosure Statement <u>  </u> IDS ((IDS)/PTO-1449) <u>  </u> Total Pages Citations</p> <p>13. <input type="checkbox"/> Preliminary Amendment <u>  </u> Total Pages</p> <p>14. <input checked="" type="checkbox"/> Return Postcard, specifically itemized (MPEP 503)</p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</p> <p>16. <input type="checkbox"/> Nonpublication Request under 35 USC 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.</p> <p>17. <input type="checkbox"/> Other</p>						
<p>18. If a <b>CONTINUING APPLICATION</b>, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:</p> <p><input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: <u>  </u></p> <p>Prior application information: Examiner: <u>  </u> Group/Art Unit: <u>  </u></p> <p>For Continuation or Divisional Apps only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p>						
<b>19. CORRESPONDENCE ADDRESS</b>						
<input checked="" type="checkbox"/> Customer Number 23910 or <input type="checkbox"/> Correspondence Address below						
NAME		Fliesler Dubb Meyer & Lovejoy LLP				
ADDRESS		Four Embarcadero Center, Fourth Floor				
CITY	San Francisco	STATE	CA	ZIP CODE	94111	
COUNTRY	USA	TELEPHONE	415/362-3800	FAX	415/362-2928	
Name (Print/Type)	Jeffrey R. Kurin			Registration No. (Attorney/Agent)	41,132	
Signature				Date	February 10, 2004	

22141 U.S. PTO  
10/7/5614

021004

16310 U.S. PTO  
021004

2003

**FEE TRANSMITTAL**

**TOTAL AMOUNT OF PAYMENT**

Subtotal (1) + Subtotal (2) + Subtotal (3) = **(\$ 950.00)**

**Complete if Known**

Application Number	New Utility Application
Filing Date	February 10, 2004
Inventor	D. Stuart Smith et al.
Group Art Unit	New Utility Application
Examiner Name	New Utility Application
Attorney Docket Number	ELAN-01111US1

**METHOD OF PAYMENT**

**1. The Commissioner is hereby authorized to:**

- ☐ Charge the indicated fees to the below mentioned deposit account.
- ☒ Charge any additional fee required under 37 CFR 1.16 - 1.21 or credit any over payments to the below mentioned deposit account.<sup>1</sup>
- ☐ Applicant claims small entity status. See 37 CFR 1.27.

Deposit Account Number: 06-1325  
Deposit Account Name: Fliesler Dubb Meyer & Lovejoy

- 2. ☒ Payment Enclosed:**  
[X] Check [ ] Other

**FEE CALCULATION (fees effective 10/1/01)**

**1. FILING FEE**

Large Entity Fee Code/Fee	Small Entity Fee Code/Fee	Fee Description	Fee Due
1001/\$770	2001/\$385	Utility Filing	<b>770</b>
1002/\$330	2002/\$165	Design Filing	
1004/\$750	2004/\$375	Reissue	
1005/\$160	2005/\$80	Provisional Filing	
<b>SUBTOTAL (1)</b>			<b>(\$770)</b>

**2. CLAIMS**

Large Entity Fee Code/Fee	Small Entity Fee Code/Fee	Fee Description
1202/\$18	2202/\$9	Claims in excess of 20
1201/\$86	2201/\$43	Independent claims in excess of 3
1203/\$280	2203/\$140	Multiple dependent claim
1204/\$86	2204/\$43	Reissue independent claims over original patent
1205/\$18	2205/\$9	Reissue claims in excess of 20 and over original patent

**3. ADDITIONAL FEES**

Large Entity Fee Code/Fee	Small Entity Fee Code/Fee	Fee Description	Fee Due
1051/\$130	2051/\$65	Surcharge - late filing fee or oath	
1052/\$50	2052/\$25	Surcharge-late provisional filing fee or cover sheet	
1812/\$2,520	1812/\$2,520	For filing a request for reexamination	
1251/\$110	2251/\$55	Extension for response within first month <sup>†</sup>	
1252/\$420	2252/\$210	Extension for response within second month <sup>†</sup>	
1253/\$950	2253/\$475	Extension for response within third month <sup>†</sup>	
1254/\$1,480	2254/\$740	Extension for response within fourth month <sup>†</sup>	
1255/\$1,970	2255/\$985	Extension for response within fifth month <sup>†</sup>	
1401/\$320	2401/\$160	Notice of Appeal	
1453/\$1,300	2453/\$650	Petition to revive unintentionally abandoned application	
1501/\$1,330	2501/\$665	Utility Issue Fee (Or Reissue)	
1502/\$470	2502/\$235	Design Issue Fee	
1460/\$130	1460/\$130	Petitions to the Commissioner	
1814/\$110	2814/\$55	Statutory Disclaimer	
1806/\$180	1806/\$180	Submission of Information Disclosure Statement	
8021/\$40	8021/\$40	Recording each patent assignment per property (times number of properties)	<b>40</b>
1809/\$750	2809/\$375	Filing a submission after final rejection (37 CFR 1.129(a))	
1801/\$770	2801/\$385	Request for Continued Examination (RCE)	
Other fee (specify):			
Other fee (specify):			
<b>SUBTOTAL (3)</b>			<b>(\$ 40)</b>

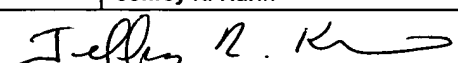
(Col. 1)		(Col. 2)		(Col. 3)		Fee		Fee Due	
For	No. of Existing Claims		Highest No. Previously Paid For		Extra**				
TOTAL	26	minus*	20 or	=	3	x	18	=	54
INDEP	4	minus*	3 or	=	1	x	1	=	86
[ ] First presentation of multiple dependent claim									0

\* Subtract the greater number of Col. 2

\*\* If the difference between Col. 1 and Col. 2 is less than zero, then enter "0" in Col. 3

**SUBTOTAL (2) (\$ 140)**

**SUBMITTED BY**

Typed or Printed Name	Jeffrey R. Kurin	<b>Complete (if applicable)</b>	
Signature		Reg. Number	41,132
		Date	February 10, 2004